Application Elements

Address To: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231

1. / X / Fee transmittal Form (Submit an original, 2./ X /Specification	and a duplicate for fee processing Total Pages / /
2.3 A /Specification	rotair ages / /

(Preferred arrangement set for below)

Descriptive title of the Invention

Cross References to Related Application

Statement Regarding Fed. Sponsored R & D

Reference to Microfiche Appendix

Background of the Invention

Brief Summary of the Invention

Brief Description of the Drawings (if filed)

Detailed Description

Claim(s)

Abstract of the Disclosure

3./ / Drawing(s)(35 USC 113)(Figs.)

Total Sheets / /

desired 4./ X /Oath or Declaration

Total Pages/3 /

a / X / Newly executed (original or copy)

Signed statement attached deleting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b).

5. / / Incorporation by reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6.	/	/ Microfiche	Computer	Program	(Appendix)
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/7./ /Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)

/ Computer Readable Copy

/ Paper Copy (Identical to computer copy)

/ Statement verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

8./ X / Assignment Papers (cover sheet & document(s)

9/ / 37 CFR 3.73(b)Statement / /Power of Attorney

10./ /English Translation Document (if applicable)

11.★/Information Disclosure / x/ Copies of IDS Citations

12./ x /Preliminary Amendment

13./ x/Return Receipt Postcard (MPEP 503)

Should be specifically itemized)
14./ /Small Entity / /Statement filed in prior application
Statements Status still proper and

15./ x / Certified Copy of Priority Document(s) (if foreign priority is claimed)

6./	/ Other	
	_	

17.	If a Continuing Application,	checl	k appropriate	box	and supply	the req	uisite inf	ormati	ion:
	1 10 - 1 - 1 -	/ /			a		· (OID)		

/ /Continuation / /Divisional / / Continuation-in part (CIP)

of prior application No

CORRESPONDENCE ADDRESS

/ Customer Number or Bar code Label

or / / Correspondence address below

Insert Customer No. or Attach bar code label here

Name:

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The filing fee has been calculated as shown below:

D	Number	Number	SMALL/LARGE	BASIC FEE
For:	Filed	Extra	ENTITY	\$385./\$770.
Basic Fee				. \$_770
Total Claims	:23	-20 = <u>3</u> x	\$09./\$18. =	54
 Indep. Claim	ns: <u>1</u>	-3 = x	\$43./\$86. =	
[] Multiple	Dependent	Claim(s) prese	ented:\$145./290	=
[x] A check	is enclosed	for the filin	g fee.	\$ 824.
1-5 11 71.55				

^{*}If the difference is less than zero, enter "0".

- [X] A check for \$864. for the filing fee and recordation fee.
- [X] The Commissioner is hereby authorized to charge any other fee required, including the issue fee, in connection with the filing and prosecution of this application, and to the extent necessary, applicant(s) hereby petition for extension(s) of time under 37 CFR 1.136, to be charged to our Deposit Account 11-0345.

Respectfully submitted,

KEIL & WEINKAUF

Herbert B. Keil Reg. No. 18,967

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